

Embracing Health Equity

OCTOBER 2016

Embracing Health Equity – We Are Health Equity!

Throughout the year, CPH staff will receive Health Equity “News Blasts” to raise awareness on topics relevant to achieving optimal health for all. These updates are brought to you by the [CPH Diversity & Equity Committee](#) and the [CPH Health Equity Section](#).

Health Inequities in Breast Cancer

October is *National Breast Cancer Awareness* month. Aside from skin cancer, the [Centers for Disease Control and Prevention \(CDC\)](#) notes breast cancer as the most common cancer among women in the U.S. **Yet, the rates of getting and dying from breast cancer differ among ethnic groups.**



Overall, new cases of breast cancer are about the same for black and white women. However:

- African-American women under age 45 have a higher incidence of breast cancer than white women.
- Hispanic/Latina women are more likely than white women to be diagnosed with late stage breast cancers.
- Breast cancer incidence is lower among Asian/Pacific Islander women than for white and black women.
- **African-American women have more than a 40 percent higher rate of breast cancer death than white women, despite a slightly lower incidence rate.**

Most available research on breast cancer lacks information on sexual orientation and/or gender identity.

However, lesbian and bisexual women have been shown to face an increased risk of developing breast cancer. In addition, [transgender men, transgender women and nonbinary individuals](#) face unique risks related to developing and screening for breast cancer.

Barriers to Care

Many factors may prevent African-American women and LGBT individuals of all races from getting breast cancer screenings and prompt follow-up care after an abnormal mammogram. [The Susan G. Komen Foundation](#) notes barriers that include, but are not limited to:

- Lack of awareness of breast cancer risks and screening methods
- Lack of knowledge about the need to get screened
- Lack of knowledge about the availability of services and location of providers
- Lack of access to regular health care
- Inability to take time off work
- Child care responsibilities
- Anxiety about the procedure
- Fear of finding cancer
- Lack of trust for medical and social service systems

[Fenway Health](#) notes barriers specific to transgender individuals that include:

- Hormone replacement therapy (HRT) has been shown to increase cancer risk in non-transgender women. Transgender women who have undergone HRT may be at increased risk for cancer.
- 2% of all breast cancer occurs in the breast tissue of non-transgender men. Being assigned male at birth does not protect a person from breast cancer.
- For transgender individuals who undergo chest reconstruction, remaining tissue may still be susceptible to breast cancer.
- Excess testosterone in the body can be converted to estrogen. Excess estrogen increases the risk of breast cancer. Transgender individuals taking testosterone may be at increased risk for breast cancer.

Helpful Links

In order for health care providers to address the disparities that occur in breast cancer screening and treatment, it is necessary to have background information about breast cancer, including risk factors and screening recommendations.

Learn more about breast cancer **risk factors** from the [Susan G. Komen Foundation](#).

Learn more about **screening recommendations** from the [American Cancer Society](#) and the [Susan G. Komen Foundation](#).

Access to Care Updates

The Access to Care program works to address and provide leadership for community initiatives and system-based responses that address health care access issues. Through collaborative partnerships, the program provides health literacy education and resources to the community. This program oversees the resource room at CPH.

Number of clients served in the Resource Room – September 2016

Total served: **95**

Presumptive Eligibility for Medicaid applications: **29**

Medicaid enrollments: **52**

Drop-ins Served (clients with questions or who want clarification about coverage): **32**

Watch for the next Embracing Health Equity News Blast coming your way! More at [Embracing Health Equity](#).

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